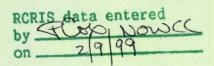
Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved. Cl48 No. 2050-0028 Expires 10/31/99 GSA No. 0240-EFA-CT

Please refer to the instructions for Filing Notification before completing this form. The Information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).  United States 8	Wast Environmen	te Ad	ctivit	Igency 1999			
I. Installation's EPA ID Number (Mark X' in the appropriate bo	(x)						
XX A. First Notification B. Subsequent Notification (Complete Item C)			C. Installation's EPA ID Number.				
11. Name of Installation (include company and specific site name	ne)	为经过					
Philip Morris H.S.A. c/o Centrobe, Inc.							
III. Location of installation (Physical address not P.O. Box or i	Route Num	ber)	時期				
Street							
4460 112th Street							
Street (Continued)							
City of Town			State	Zip Code			
Urbandale			IA	50322			
County Code   County Name							
Polk							
		## P	1.48				
Street or P.O. Box							
11253 Meredith Drive							
			State	Zip Code			
City or Town			IA	50322			
Urbandale							
V. Installation Contact (Person to be contacted regarding was				1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1			
Name (Last)	(Firs						
Zimmerman David							
Job Title		2000 100	umber (Area Code and Number)				
Environmental Engineer		04) 2	74-480				
VI. Installation Contact Address (See Instructions)	i Title	***	The same of the sa				
Location Mailing Other  B. Street or P.O. Box							
X P. O. Box 26603		-					
City or Town			State	Zip Code			
Richmond			VA	23261			
VII. Ownership (See Instructions)	经数据证据		4 1				
A. Name of Installation's Legal Owner							
R and R Investors, LTD							
Street, P.O. Box, of Route Number							
1280 Office Plaza Drive		100					
City or Town			State	Zip Code			
West Des Moines			IA	50266			
Phone Number (Area Code and Number)  8. Land Ty	pe   C. C	Wner Typ		D. Change of Owner (Date Changed) Indicator Month Day Year			
(515) 223-4901 P		P	Yes	X No			
EPA Form 8700-12 (Rev. 10/09/96)				Continued on Revers			





SENT BY:P. M. USA ENVIRONMENT; 2- 9-99; 8:32; PHILIP MORRIS USA-

Form Approved. OMB No. 2050-0028 Expires 10/21/99 GSA No. 0246-EPA-07 Please print or type with ELITE type (12 characters per inch) in the unshaded areas only ID - For Official Use Only THE PROPERTY OF THE PARTY OF TH VIII. Type of Regulated Waste Activity (Mark X' in the appropriate boxes; Refer to instructions) A. Hazardous Waste Activity B. Used Oil Recycling Activities 3. Treater, Storer, Disposer (at Used Oil Fuel Marketer Generator (See Instructions) a, Greater than 1000kg/mo (2,200 lbs.) b. 100 to 1000 kg/mo (200-2,200 lbs.) c. Less than 100 kg/mo (220 lbs) a. Marketer Directs Shipment of Used
Oil to Off-Specification Burner installation) Note: A permit is required for this activity; see Db. Marketer Who First Claims the Used instructions. Oil Meets the Specifications Hazardous Waste Fuel Transporter (Indicate Mode in boxes 1-5 2. Used Oil Burner - Indicate Type(s) of a. Generator Marketing to Burner Combustion Device(s)

a. Utility Boiler b. Other Marketers a. For own waste only b. For commercial purposes c. Boiler and/or Industrial Furnace 1. Smelter Deferral b. Industrial Boiler c. Industrial Furnace 2. Small Quantity Exemption Mode of Transportation 3. Used Oil Transporter - Indicate Type(s) 1. Air 2. Rail Indicate Type of Combustion of Activity(les) Device(s)

1. Utility Boiler a. Transporter
b. Transfer Facility
4. Used Oil Processor/Re-refiner - Indicate 3. Highway 4. Water 2. Industrial Boiler 3. Industrial Furnace 5. Other - specify Type(s) of Activity(ies) □ 5. Underground injection Control a. Process b. Re-refine IX. Description of Hazardous Wastes (Use additional sheets if necessary) W2124-96 A. Characteristics of Nonlisted Hazardous Wastes. (Mark X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24) 2 Corrosive 3. Reactive 4. Toxicity 1. lantable (D002) (D003) Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s)) B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 weste codes.) 3 4 6 9 7 8 10 11 12 C. Other Wastes, (State or other wastes requiring a handler to have an I.D. number, See instructions.) 3 CHRESCHOOL TO THE DESIGNATION OF THE PERSON X. Certification I certify under pensity of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel property gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. Name and Official Title (Type or print) Signature Date Signed 2-9-99 B. C. Kiernan, Manager The Manager of the Control of the Co XI. Comments Out of date promotional sales items

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

EPA Form 8700-12 (Rev. 10/09/96)

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ARTD REGION VII;# 3/ 4



8:37 ;

#### PHILIP MORRIS

. \_CEIVEU

FEB 0 9 1999

C.P. BRANCH

U.S.A.

P. O. BOX 26603, RICHMOND, VIRGINIA 23261 TELEPHONE (804) 274-2000

February 8, 1999

Mr. Perce Cox Environmental Protection Agency Region 7 ARTD\RESP 726 Minnesota Avenue Kansas City, KS 66101

Subject: First Notification of Regulated Waste Activity

Dear Mr. Cox:

Please find enclosed a First Notification of Regulated Waste Activity for the Philip Morris U. S. A. c/o Centrobe, Inc. physically located in Polk County at 4460 112<sup>th</sup> Street, Urbandale, IA 50322.

Should you have any questions, I can be reached at 804-274-4803.

Sincerely,

David R. Zinanerman Environmental Engineer

Enclosure: First Notification of Regulated Waste Activity

Please print or type with ELITE type (12 characters per inch) in the unshaded areas only

Form Approved. OMB No. 2050-0026 Expires 10/31/99 GSA No. 0246-EPA-OT

Please refer to the Instructions for Filing Notification before completing this form. The Information requested here is required by law (Section 3010 of the Resource Conservation and Recovery Act).

## **EPA**

### Notification of Regulated Waste Activity

Date Received (For Official Use Only)

and Recovery Act).	United States Environmental Protection Agency					FEB 0 9 1999			
I. Installation's EPA ID Number (Mark 'X' in the appropriate box)									
XX A. First Notification	A Subsequent Motification			C. Installation's EPA ID Number  LAROCOOLSS					
II. Name of Installation (Include company and specific site name)									
Philip Morris II	S.A. c/o Centrobe	- Inc.				and the second s			
III. Location of Installation (Physical address not P.O. Box or Route Number)									
Street									
4460 112th Stree	et								
Street (Continued)		*******************************							
City of Town				State	Zip Code				
Urbandale				IA	50322				
County Code County Na	ame								
Polk									
IV. Installation Mailing A	Address (See Instructions)								
Street or P.O. Box	· · · · · · · · · · · · · · · · · · ·								
11253 Meredith I	rive								
City or Town				State	Zip Code				
Urbandale				IA	50322				
V. Installation Contact (	Person to be contacted reg	arding waste a	ctivities at site	;)					
Name (Last)			(First)			and the second s			
Zimmerman			David						
Job Title				nber (Area Code and Number)					
Environmental En					274-4803				
Common Co	Address (See Instructions)			ar il					
COCATO I MANING CINA	Street or P.O. Box					and a second sec			
City or Town	0. Box 26603		d d	State	Zip Code				
Richmond					23261				
				VA					
A. Name of Installation's Le	egal Owner	No.	nymia amin'ny fivondrona dia mandra dia mand	20 A.S. 1542 (17 <sub>31</sub> )	and the second of the second o	The second secon			
R and R Investor				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
Street, P.O. Box, of Route I	Number								
1280 Office Plaz	a Drive	Western Annah a	***			Marie			
City or Town				State	Zip Code				
West Des Moines				IA 50266					
Phone Number (Area Code	and Number)	B. Land Type	C. Owner Typ		Change of Owner	(Date Changed) Month Day Year			
(515) 223-4901		P	P	Yes	X No	Month Day Year			
	A 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-								

SENT BY:P. M. USA ENVIRONMENT; 2- 9-99; 8:32 ; PHILIP MORRIS USA-Form Approvad. OMB No. 2050-0028 Expires 10/31/09 Please print or type with ELITE type (12 characters per inch) in the unshaded areas only GSA No. 0248-EPA-OT ID - For Official Use Only VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes; Refer to instructions) THE PART OF THE PA A. Hazardous Waste Activity B. Used Oil Recycling Activities Generator (See instructions) Treater, Storer, Disposer (at Used Oil Fuel Marketer a. Greater than 1000kg/mo (2,200 lbs.) installation) Note: A permit is a. Marketer Directs Shipment of Used b. 100 to 1000 kg/mo (200-2,200 lbs.) required for this activity; see Oil to Off-Specification Burner c. Less than 100 kg/mo (220 lbs) b. Marketer Who First Claims the Used instructions. Transporter (Indicate Mode in boxes 1-5 Oil Meets the Specifications Hazardous Waste Fuel 2. Used Oil Burner - Indicate Type(s) of below) a. Generator Marketing to Burner a. For own waste only Combustion Device(s) b. Other Marketers b. For commercial purposes a. Utility Boiler c. Boiler and/or industrial Furnace b. Industrial Boiler 1. Smelter Deferral c. Industrial Furnace Mode of Transportation 2. Small Quantity Exemption 3. Used Oil Transporter - Indicate Type(s) 1. Air Indicate Type of Combustion of Activity(les) 2. Rail Device(s) a. Transporter
b. Transfer Facility 3. Highway 1. Utility Boiler 4. Water 2. Industrial Boiler Used Oil Processor/Re-refiner - Indicate 5. Other - specify 3. Industrial Furnace Type(s) of Activity(ies) 5. Underground Injection Control a. Process b. Re-refine IX. Description of Hazardous Wastes (Use additional sheets if necessary) A. Characteristics of Nonlisted Hazardous Wastes. (Mark X' in the boxes corresponding to the characteristics of nonlisted hazardous wastes your installation handles; See 40 CFR Parts 261.20 - 261.24) 1. Ignitable 2. Corrosive 3. Reactive 4. Toxicity (DO01) (D002) (D003) Characteristic (List specific EPA hazardous waste number(s) for the Toxicity characteristic contaminant(s)) X B. Listed Hazardous Wastes. (See 40 CFR 261.31 - 33; See instructions if you need to list more than 12 waste codes.) 1 2 3 4 5 6 7 8 9 10 11 12 C. Other Wastes, (State or other wastes requiring a handler to have an I.D. number, See instructions.) 1 3 ß X. Certification I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. Signature Name and Official Title (Type or print) Date Signed B. C. Kiernan, Manager

I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

XI. Comments

Out of date promotional sales items

Note: Mail completed form to the appropriate EPA Regional or State Office. (See Section III of the booklet for addresses.)

EPA Form 8700-12 (Rev. 10/09/96)



# Philip Morris U.S.A.

# Environmental Compliance and Engineering Richmond, Virginia Facsimile Cover Sheet

This facsimile transmission (and/or the documents accompanying it) may contain confidential information belonging to the sender. The information is intended only for the use of the addressee or entity named below.

If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance of the contents of this information is strictly prohibited by law.

If you have received this transmission in error, please immediately notify us by telephone to arrange for the return of the documents.

## Please telephone facsimile transmission questions to (804) 274-2207

Date: ,	2/9/99
To:	MR. Cox
Company:	USEPA-RegiON 7 ARTD RESP
Phone:	913-551-7126
Fax:	913-551-7947
	David R Zimmerman
Company:	
Phone:	804-274-4803
Fax:	-4572
-	uding cover: 5
<u>Comments</u>	Thanks for issueing the Id. Number to me! Hand Copy to Follow.